

NEW FREEDOM TRANSITION PLAN

Attachment #2: Home and Community-Based Settings Waiver Transition Plan

Specify the state's process to bring this waiver into compliance with federal home and community-based (HCB) settings requirements at 42 CFR 441.301(c)(4)-(5), and associated CMS guidance. Consult with CMS for instructions before completing this item. This field describes the status of a transition process at the point in time of submission. Relevant information in the planning phase will differ from information required to describe attainment of milestones.

To the extent that the state has submitted a statewide HCB settings transition plan to CMS, the description in this field may reference that statewide plan. The narrative in this field must include enough information to demonstrate that this waiver complies with federal HCB settings requirements, including the compliance and transition requirements at 42 CFR 441.301(c)(6), and that this submission is consistent with the portions of the statewide HCB settings transition plan that are germane to this waiver.

Quote or summarize germane portions of the statewide HCB settings transition plan as required. Note that Appendix C-5 HCB Settings describes settings that do not require transition; the settings listed there meet federal HCB setting requirements as of the date of submission. Do not duplicate that information here.

Update this field and Appendix C-5 when submitting a renewal or amendment to this waiver for other purposes. It is not necessary for the state to amend the waiver solely for the purpose of updating this field and Appendix C-5. At the end of the state's HCB settings transition process for this waiver, when all waiver settings meet federal HCB setting requirements, enter "Completed" in this field, and include in Section C-5 the information on all HCB settings in the waiver.

The following information is included in Washington's Statewide Transition Plan that will be submitted to CMS on February 12, 2015.

ALTSA reviewed the requirements for HCBS settings and identified settings that fully comply with the requirements, settings that will comply with the requirements after implementing changes, and settings that do not or cannot meet the HCBS requirements. The review included an analysis of state laws, rules, policies, processes, and forms/tools in relation to the new federal HCBS requirements and an identification of changes that are necessary to achieve and maintain compliance with the federal HCBS requirements.

The State assures that services are rendered in settings that meet home and community based characteristics. New Freedom waiver participants reside in private homes located in the community. Services are provided in the participant's home or in typical public community settings (such as health care provider offices, auto repair facilities, dental offices, etc.) to which non-waiver individuals have free access. This waiver does not provide services in residential or non-residential settings that include congregate living facilities, institutional settings or on the grounds of institutions.

C-5: Home and Community-Based Settings

Explain how residential and non-residential settings in this waiver comply with federal HCB Settings requirements at 42 CFR 441.301(c)(4)-(5) and associated CMS guidance. Include:

- 1. Description of the settings and how they meet federal HCB Settings requirements, at the time of submission and in the future.*
- 2. Description of the means by which the state Medicaid agency ascertains that all waiver settings meet federal HCB Setting requirements, at the time of this submission and ongoing.*

Note instructions at Module 1, Attachment #2, HCB Settings Waiver Transition Plan for description of settings that do not meet requirements at the time of submission. Do not duplicate that information here.

The following information is included in Washington's Statewide Transition Plan that will be submitted to CMS on February 12, 2015.

ALTSA reviewed the requirements for HCBS settings and identified settings that fully comply with the requirements, settings that will comply with the requirements after implementing changes, and settings that do not or cannot meet the HCBS requirements. The review included an analysis of state laws, rules, policies, processes, and forms/tools in relation to the new federal HCBS requirements and an identification of changes that are necessary to achieve and maintain compliance with the federal HCBS requirements.

Settings that fully comply with HCBS Characteristics:

- In-home Settings
- Adult Day Services
- Community Healthcare Providers
- Dental Providers
- Vehicle Modification Providers
- Veterinarians for Service Animals
- Transportation Providers

Analysis by Setting

In-Home

Setting Description: These are private homes or apartments located in the community where the client lives and receives HCB services such as personal care and other supportive waiver services.

Characteristics/Requirements	In-Home State Assessment	Oversight Process
The setting is integrated in, and supports full access of individuals receiving Medicaid HCBS to, the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life,	Chapters 388-71 WAC , 388-106 , and Chapters 74.34 , 74.39A RCW contain the administrative rules and laws for this setting. Waiver participants and state	Case Managers (CMs) complete face-to-face assessments annually and when there is a significant change in the client's condition. Clients who require targeted case

Characteristics/Requirements	In-Home State Assessment	Oversight Process
control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.	plan participants access services in their homes and in typical public community settings. The State has completed a review of state laws and regulations regarding the inhome setting. All rules and regulations regarding this setting are consistent with federal HCBS setting regulations.	management receive more frequent contacts.

<p>The setting is selected by the individual from among setting options including non-disability specific settings and an option for a private unit in a residential setting. The setting options are identified and documented in the person-centered service plan and are based on the individual's needs, preferences, and, for residential settings, the resources available for room and board.</p>	<p>Services are provided in person's own private home or apartment.</p>	<p>CMs offer the individual choices of long-term care settings and provider types.</p>
<p>An individual's essential personal rights of privacy, dignity and respect, and freedom from coercion and restraint are protected.</p>	<p>Case Managers review with the client the client rights and responsibilities form which discusses the client's rights to be treated with dignity, respect, and without discrimination; the right to have information kept private; the right to not be abused, neglected, financially exploited, or abandoned; the right to make choices about services; the right to not be forced to answer questions or do something the client does not want to do (DSHS 16-172).</p>	<p>Case Managers (CMs) complete face-to-face assessments annually and when there is a significant change in the client's condition. Clients who require targeted case management receive more frequent contacts.</p> <p>CMs ensure that client rights are protected and make referrals to Adult Protective Services (APS) as required.</p>
<p>Individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact are optimized</p>	<p>Chapters 388-71 WAC, 388-106, and Chapters 74.34, 74.39A RCW contain the administrative rules and laws for this setting.</p>	<p>Case Managers (CMs) complete face-to-face assessments annually and when there is a significant change in the client's</p>

Characteristics/Requirements	In-Home State Assessment	Oversight Process
and not regimented.	Case Managers review with the client the client rights and responsibilities form which discusses the client's rights to be treated with dignity, respect, and without discrimination; the right to have information kept private; the right to not be abused, neglected, financially exploited, or abandoned; the right to make choices about services; the right to not be forced to answer questions or do something the client does not want to do.	condition. Clients who require targeted case management receive more frequent contacts.

<p>Individual choice regarding services and supports, and who provides them, is facilitated.</p>	<p>Chapters 388-71 WAC, 388-106, and Chapters 74.34, 74.39A RCW contain the administrative rules and laws for this setting.</p> <p>Case Managers review with the client the client rights and responsibilities form which discusses the client's rights to be treated with dignity, respect, and without discrimination; the right to have information kept private; the right to not be abused, neglected, financially exploited, or abandoned; the right to make choices about services; the right to not be forced to answer questions or do something the client does not want to do.</p>	<p>Case Managers (CMs) complete face-to-face assessments annually and when there is a significant change in the client's condition. Clients who require targeted case management receive more frequent contacts.</p>
<p>Provider owned or controlled residential-setting requirements do not apply.</p>	<p>Services are provided in the person's own home or apartment.</p>	<p>Not applicable.</p>

Adult Day Services

Setting Description: Adult Day Service programs are community-based programs with the goals of meeting the needs of adults with impairments through individualized plans of care. Adults may receive services through an adult day care or adult day health program. Adult Day Care is a supervised daytime program providing core services for adults with medical or disabling conditions that do not require the intervention or services of a registered nurse or licensed rehabilitative therapist acting under the supervision of the client's authorizing practitioner. Adult Day Health (ADH) is a supervised daytime program providing skilled nursing and/or rehabilitative therapy services in addition to the core services of adult day care. Adult day health services are appropriate for adults with medical or disabling conditions that require the intervention or services of a registered nurse or licensed rehabilitative therapist acting under the supervision of the client's

authorizing practitioner. All community members have free access to these services and settings including both Medicaid and non-Medicaid funded participants.

Characteristics/Requirements	Adult Day Services State Assessment	Oversight Process
The setting is integrated in, and supports full access of individuals receiving Medicaid HCBS to, the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.	<p>Adult day service programs provide opportunities for community integration. The settings are integrated into the greater community and do not preclude access to the community.</p> <p>WAC 388-71-0742(1) Center policies must define ...participant rights and responsibilities... (3) A participant bill of rights describing the client's rights and responsibilities must be developed, posted, distributed to and explained to participants, families, staff and volunteers.</p>	<p>The Area Agency on Aging monitors the adult day center at least annually to determine compliance with adult day care and/or adult day health requirements and the requirements for contracting with the department or the AAA, including compliance with this requirement.</p>

<p>The setting is selected by the individual from among setting options including non-disability specific settings. The setting options are identified and documented in the person-centered service plan and are based on the individual's needs and preferences.</p>	<p>During the assessment process, it is a CM responsibility to inform individuals of their options regarding settings and providers. This is documented in the Service Episode Record of the CARE assessment tool.</p>	<p>Monitoring of client choice of all service setting options is conducted during the annual Quality Assurance monitoring cycle.</p> <p>The Area Agency on Aging monitors the adult day center at least annually to determine compliance with adult day care and/or adult day health requirements and the requirements for</p>
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Characteristics/Requirements	Adult Day Services State Assessment	Oversight Process
		contracting with the department or the AAA, including compliance with this requirement.

<p>An individual's essential personal rights of privacy, dignity and respect, and freedom from coercion and restraint are protected.</p>	<p>WAC 388-71-0768(1) and (5) (a) The facility must have sufficient space....The program must provide and maintain essential space necessary to provide services and to protect the privacy of the participants receiving services. In addition to space for program activities, the facility must have a rest area and designated areas to permit privacy.</p>	<p>The Area Agency on Aging monitors the adult day center at least annually to determine compliance with adult day care and/or adult day health requirements and the requirements for contracting with the department or the AAA, including compliance with this requirement.</p>
<p>Individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact are optimized and not regimented.</p>	<p>WAC 388-71-0718(4)(c). Also, in the revised WAC, the Department enhanced the participant's right to participate per their preferences (new WAC 388-71-0702(L)).</p> <p>The rule mandates a negotiated service agreement that is client directed, and that clients must be offered alternatives when they do not want to participate.</p>	<p>The Area Agency on Aging monitors the adult day center at least annually to determine compliance with adult day care and/or adult day health requirements and the requirements for contracting with the department or the AAA, including compliance with this requirement.</p>

Individual choice regarding services and supports, and who provides them, is facilitated.	During the assessment process, it is a CM responsibility to inform individuals of their options regarding settings and providers. This is documented in the Service Episode Record of the CARE assessment tool.	The Area Agency on Aging monitors the adult day center at least annually to determine compliance with adult day care and/or adult day health requirements and the requirements for contracting with the department or the AAA, including compliance with this requirement.
The setting is physically accessible to the individual.	WAC 388-71-0766 (1)(4)(5)(6)(7) regarding facility location and facility hardware, and WAC 38871-0768 regarding physical environment requirements.	The Area Agency on Aging monitors the adult day center at least annually to determine compliance with adult day care and/or
Characteristics/Requirements	Adult Day Services State Assessment	Oversight Process
	Also, the Department has proposed WAC effective January 2015 requiring that the site have a ramp if there are stairs at the site.	adult day health requirements and the requirements for contracting with the department or the AAA, including compliance with this requirement.

Community Healthcare Providers

Setting Description: Community Healthcare Providers are located in typical community locations (such as physician offices, optometrist offices, OT/PT/Speech therapists' offices, and audiology offices). All community members have free access to these services and settings including both Medicaid and nonMedicaid funded participants.

Characteristics/Requirements	Community Healthcare Providers State Assessment	Oversight Process
<p>Individual choice regarding services and supports, and who provides them, is facilitated.</p>	<p>During the assessment process, it is the case manager's responsibility to inform individuals of their options regarding settings and providers. This is documented in the Service Episode Record of the CARE assessment tool.</p>	<p>Monitoring is conducted during the annual Quality Assurance monitoring cycle.</p> <p>Department of Health provides oversight of healthcare provider credentials.</p>
<p>The setting is integrated in, and supports full access of individuals receiving Medicaid HCBS to, the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.</p>	<p>The settings are integrated into the greater community and do not preclude access to the community.</p> <p>Washington's legislature has codified its intent that choice, participation, privacy, and the opportunity to engage in religious, political, recreational, and other social activities foster a sense of self-worth and enhance the quality of life for long-term care participants.</p> <p>Washington State Law provides clear protections of</p>	<p>At the time of initial contracting and at contract renewal, the FMS ensures that the provider meets all provider qualifications including business licenses and any other credentials related to the provision of contracted services.</p> <p>Healthcare professions are regulated by the Department of Health (DOH). Complaints are investigated by DOH. All Healthcare providers are subject to the Uniform</p>

Characteristics/Requirements	Community Healthcare Providers State Assessment	Oversight Process
	rights. Chapter 49.60 of the Revised Code of Washington (RCW) is the state's law against discrimination and which created the Washington State Human Rights Commission to develop policies and rules to eliminate and prevent discrimination. Chapter 162-26 in Washington Administrative Code (WAC) identifies unfair practices to include reasonable accommodations, accessibility and service animals.	Disciplinary Act (RCW 18.130.160)

Dental Providers

Setting Description: Dental providers are located in typical community locations (such as dental offices, dental clinics). All community members have free access to these services and settings including both Medicaid and non-Medicaid funded participants.

Characteristics/Requirements	Dental Providers State Assessment	Oversight Process
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Individual choice regarding services and supports, and who provides them, is facilitated.	During the assessment process, it is a CM responsibility to inform individuals of their options regarding settings and providers. This is documented in the Service Episode Record of the CARE assessment tool.	Monitoring is conducted during the annual Quality Assurance monitoring cycle. The Department of Health provides oversight of dental providers' credentials.
The setting is integrated in, and supports full access of individuals receiving Medicaid HCBS to, the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access	The settings are integrated into the greater community and do not preclude access to the community. Washington's legislature has codified its intent that choice, participation, privacy, and the opportunity to engage in	Health care professions are regulated by the Department of Health (DOH). Complaints are investigated by DOH. All Healthcare providers are subject to the Uniform Disciplinary Act (RCW 18.130.160)
Characteristics/Requirements	Dental Providers State Assessment	Oversight Process

<p>as individuals not receiving Medicaid HCBS.</p>	<p>religious, political, recreational, and other social activities foster a sense of self-worth and enhance the quality of life for long-term care participants.</p> <p>Washington State Law provides clear protections of rights. Chapter 49.60 of the Revised Code of Washington (RCW) is the state's law against discrimination and which created the Washington State Human Rights Commission to develop policies and rules to eliminate and prevent discrimination. Chapter 162-26 in Washington Administrative Code (WAC) identifies unfair practices to include reasonable accommodations, accessibility and service animals.</p>	
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Vehicle Modification Providers

Setting Description: These facilities are located in typical community locations (such as car repair shops, car dealers, and vehicle modification shops). All community members have free access to these services and settings including both Medicaid and non-Medicaid funded participants.

Characteristics/Requirements	Vehicle Modification Providers State Assessment	Oversight Process
Individual choice regarding services and supports, and who provides them, is facilitated.	During the assessment process, it is the case manager's responsibility to inform individuals of their options regarding settings and providers. This is documented in the Service Episode Record of the CARE assessment tool.	Monitoring is conducted during the annual Quality Assurance monitoring cycle.
The setting is integrated in, and supports full access of individuals receiving	The settings are integrated into the greater community	Automotive Repair Providers are governed
Characteristics/Requirements	Vehicle Modification Providers State Assessment	Oversight Process

<p>Medicaid HCBS to, the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.</p>	<p>and do not preclude access to the community.</p> <p>Washington's legislature has codified its intent that choice, participation, privacy, and the opportunity to engage in religious, political, recreational, and other social activities foster a sense of self-worth and enhance the quality of life for long-term care participants.</p> <p>Washington State Law provides clear protections of rights. Chapter 49.60 of the Revised Code of Washington (RCW) is the state's law against discrimination and which created the Washington State Human Rights Commission to develop policies and rules to eliminate and prevent discrimination. Chapter 162-26 in Washington Administrative Code (WAC) identifies unfair practices to include reasonable accommodations, accessibility and service animals.</p>	<p>by Chapter 46.71 RCW. Complaints regarding auto repairs can be submitted to the Washington Attorney General's Consumer Protection Division. These providers are also required to have a business license from the Washington State Dept. of Revenue.</p>
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Veterinarians for Service Animals

Setting Description: These providers are located in typical community locations (such as veterinarian offices and clinics). All community members have free access to these services and settings including both Medicaid and non-Medicaid funded participants.

Characteristics/Requirements	Veterinarians for Service Animals State Assessment	Oversight Process
Individual choice regarding services and supports, and who provides them, is facilitated.	During the assessment process, it is the case manager's responsibility to	Monitoring is conducted during the annual Quality Assurance monitoring
Characteristics/Requirements	Veterinarians for Service Animals State Assessment	Oversight Process
	inform individuals of their options regarding settings and providers. This is documented in the Service Episode Record of the CARE assessment tool.	cycle.

<p>The setting is integrated in, and supports full access of individuals receiving Medicaid HCBS to, the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.</p>	<p>The settings are integrated into the greater community and do not preclude access to the community.</p> <p>Washington's legislature has codified its intent that choice, participation, privacy, and the opportunity to engage in religious, political, recreational, and other social activities foster a sense of self-worth and enhance the quality of life for long-term care participants.</p> <p>Washington State Law provides clear protections of rights. Chapter 49.60 of the Revised Code of Washington (RCW) is the state's law against discrimination and which created the Washington State Human Rights Commission to develop policies and rules to eliminate and prevent discrimination. Chapter 162-26 in Washington Administrative Code (WAC) identifies unfair practices to include reasonable accommodations, accessibility and service animals.</p>	<p>Veterinarians are regulated by the Department of Health (DOH) per Chapter RCW 18.92 and Chapter 246937 WAC. Complaints are investigated by DOH.</p>
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Transportation Providers

Setting Description: Transportation services are provided by typical community modes of transportation (such as car, taxi, bus, and private vehicle). All community members have free access to these services and settings including both Medicaid and non-Medicaid funded participants.

Characteristics/Requirements	Transportation Providers State Assessment	Oversight Process
Individual choice regarding services and supports, and who provides them, is facilitated.	During the assessment process, it is the case manager's responsibility to inform individuals of their options regarding settings and providers. This is documented in the Service Episode Record of the CARE assessment tool.	Monitoring is conducted during the annual Quality Assurance monitoring cycle.

<p>The setting is integrated in, and supports full access of individuals receiving Medicaid HCBS to, the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.</p>	<p>The settings do not preclude access to the community.</p> <p>Washington's legislature has codified its intent that choice, participation, privacy, and the opportunity to engage in religious, political, recreational, and other social activities foster a sense of self-worth and enhance the quality of life for long-term care participants.</p> <p>Washington State Law provides clear protections of rights. Chapter 49.60 of the Revised Code of Washington (RCW) is the state's law against discrimination and which created the Washington State Human Rights Commission to develop policies and rules to eliminate and prevent discrimination. Chapter 162-26 in Washington Administrative Code (WAC) identifies unfair practices to include reasonable accommodations, accessibility and service animals.</p>	<p>At the time of initial contracting and at contract renewal, the FMS ensures that the provider meets all provider qualifications including business licenses and any other credentials related to the provision of contracted services.</p>
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Comments Received by ALTSA

The following table contains summaries of comments received by ALTSA about the draft statewide transition plan that are relevant to the New Freedom waiver-specific transition plan, the Department's response to the comments, clarifications and modifications made to the transition plan in response to the comments. After reviewing and responding to all public comments, Washington determined that no substantive changes to the New Freedom waiver-specific transition plan were necessary.

Topic	From	Comment Received	State Response	Modification to the Transition Plan Made in Response to this Public Comment
Adult Day Care	Advocate	Require adult day care to be provided in the community	ALTSA analyzed all adult day services and found them to be community-based programs located within community settings. The AAAs will continue to monitor facilities for compliance with these requirements.	No change was made to the transition plan.
Adult Day Services	Advocate organization	There should be an additional onsite review to include interviews with clients, providers, AAA case managers to determine if they meet the requirements.	All adult day service programs were visited. Clients and providers were interviewed.	Added language to the transition plan to make it clear that onsite visits were conducted.
Adult Day Services	Advocacy organization	None of the core services in WAC 388-71-0704 identify supports for accessing the greater community.	This activity is addressed in person-centered planning.	No change was made to the transition plan.
Setting selected by the individual from among setting options	Advocacy organization	Case managers are documenting that individuals are informed of their options regarding settings and providers. Agrees with the states assessment of this requirement.	The state appreciates this comment.	No change was made to the transition plan.

Topic	From	Comment Received	State Response	Modification to the Transition Plan Made in Response to this Public Comment
		Practice is consistently followed.		
Integration/Inclusion	Advocate	Supports inclusion and the rights of individuals with disabilities and person-centered service planning.	The state agrees with this comment.	No change was made to the transition plan as person-centered planning is not part of the transition plan.
In-home oversight process	Advocacy organization	Recommends that case managers be required by policy to ask clients if they can do anything to support the individual's rights, dignity and privacy	The state appreciates and is considering this recommendation. Case managers complete face-to-face assessments annually and when there is a significant change in the client's condition. These are opportunities to observe first hand whether there are any issues in the home. In addition all clients receive and review the Rights and Responsibilities form which outlines these important rights.	No change was made to the transition plan.
In-home oversight process	Advocacy organization	Provider trainings should reiterate privacy and confidentiality expectations.	The state agrees with this comment. This is a required topic in provider training.	No change was made to the transition plan.
In-home oversight process	Advocacy organization	There should be information for clients about how to make a complaint, request a hearing, etc. including information on advocacy.	The state agrees with this comment. All clients receive this information during their	No change was made to the transition plan.

Topic	From	Comment Received	State Response	Modification to the Transition Plan Made in Response to this Public Comment
			assessment and in planned action notices.	
In-home oversight process	Advocacy organization	Recommends the Department continue working with consumers to develop and revise training curriculum and requirements.	Although the state agrees with this comment, the comment is unrelated to contents of the transition plan.	No change was made to the transition plan.
Yearly face-to-face contact with client	Advocacy organization	Ensuring yearly face-to-face contact with clients is critically important to any oversight process. We are pleased that this practice will continue.	The State appreciates this comment.	No change was made to the transition plan.